

IN RE: : CASE NO. 19-21165-JAD  
Leslie Lyons, : CHAPTER 13  
Kathy Lyons, :  
Debtors :  
: Leslie Lyons, :  
: Kathy Lyons, :  
Movants :  
: vs. :  
Aaa Debt Rec and all Parties of Interest :  
Ronda J. Winnecour, Esquire, :  
Chapter 13 Trustee, :  
Respondent :

**AMENDMENT COVER SHEET**

Amendment(s) to the following petition, list(s), schedule(s), or statement(s) are transmitted herewith:

Voluntary Petition *Specify reason for amendment:*

Official Form 6 Schedules (Itemization of Changes Must Be Specified)

Summary of Schedules

Schedule A – Real Property

Schedule B – Personal Property

Schedule C – Property Claimed as Exempt

Schedule D – Creditors holding Secured Claims

Check One:

Creditor(s) Added

NO creditor(s) Added

Creditor(s) Deleted

Schedule E – Creditors Holding Unsecured Priority Claims

Check One:

Creditor(s) Added

NO creditor(s) Added

Creditor(s) Deleted

Schedule F – Creditors Holding Unsecured Nonpriority Claims

Check One:

Creditor(s) Added

NO creditor(s) Added

Creditor(s) Deleted

Schedule G – Executory Contracts and Unexpired Leases

Check One:

Creditor(s) Added

NO creditor(s) Added

Creditor(s) Deleted

Schedule H – Codebtors

X Schedule I – Current Income of Individual Debtor(s)

Schedule J – Current Expenditures of Individual Debtor(s)

Statement of Financial Affairs

Chapter 7 Individual Debtor's Statement of Intention

Chapter 11 List of Equity Security Holders

Chapter 11 List of Creditors Holding 20 Largest Unsecured Claims

Disclosure of Compensation of Attorney for Debtor

Other: \_\_\_\_\_

Pursuant to Fed.R.Bankr.P.1009(a) and Local Rule 1009-1, I certify that notice of the filing of the amendment(s) checked above has been given this date to the U.S. Trustee, the trustee in this case, and to entities affected by the amendment as follows:

Aaa Debt Rec  
Pob 129  
Monroeville, PA 15146

PA American Water  
PO Box 578  
Alton, IL 62002

Bureau Of Account Mana  
Bureau Of Account  
Camp Hill, PA 17011

PA American Water  
PO Box 371412  
Pittsburgh, PA 15250

Capital One  
PO Box 30281  
Salt Lake City, UT 84130

Peoples Gas Bankruptcy Dept.  
375 N Shore Drive Ste 600  
Attn: Dawn Linder  
Pittsburgh, PA 15212

City and School District of Pittsburgh  
c/o Goehring Rutter & Boehm  
437 Grant Street, 14th Floor  
Pittsburgh, PA 15219

Pittsburgh Water & Sewer  
C/O Jordan Tax  
102 Rahway Street  
McMurray, PA 15317

Duquense Light Company  
c/o Keri P. Ebeck Bernstien & Burkley PC  
707 Grant Street Ste. 2200  
Pittsburgh, PA 15219

Professional Credit Se  
Po Box 7548  
Springfield, OR 97475

First Commonwealth Bank  
601 Philadelphia St  
Indiana, PA 15701

PYOD LLC  
C/O Resurgnet Capital  
PO Box 19008  
Greenville, SC 29602

Goehring, Rutter & Boehm  
437 Grant Street 14th FL  
Pittsburgh, PA 15219

Rushmore Loan Management  
P.O. Box 52708  
Irvine, CA 92619

Jefferson Capital  
PO BOX 7999  
Saint Cloud, MN 56302

Rushmore Loan Management  
P.O. Box 55004  
Irvine, CA 92619

Jordan Tax Service, Inc.  
102 Rahway Road  
Canonsburg, PA 15317

Td Auto Finance  
Po Box 9223  
Farmington Hills, MI 48333

KML  
701 Market Street, Suite 5000  
Philadelphia, PA 19106

Verizon  
500 Technology Dr  
Weldon Spring, MO 63304

LVNV Funding  
Resurgent Capital Services  
PO Box 10587  
Greenville, SC 29603-0587

Wilmington Savings Fund Society  
15480 Laguna Canyon Road  
Suite 100  
Irvine, CA 92618

Markone Financial Llc  
P O Box 17038  
Jacksonville, FL 32245

Date: November 11, 2020

/s/ Paul W. McElrath

Paul W. McElrath, Esquire

Attorney for Debtor

P.A. Id. No. 86220

The Law Offices of Paul McElrath

1641 Saw Mill Run Blvd

Pittsburgh, PA 15210

(412) 765-3606

paulm@mcelrathlaw.com

Fill in this information to identify your case:

Debtor 1	<u>Leslie Lyons</u>
Debtor 2 (Spouse, if filing)	<u>Kathy Lyons</u>
United States Bankruptcy Court for the:	<u>WESTERN DISTRICT OF PENNSYLVANIA</u>
Case number (If known)	<u>19-21165-JAD</u>

Check if this is:

- An amended filing  
 A supplement showing postpetition chapter 13 income as of the following date:

MM / DD / YYYY

## Official Form 106I

### Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### Part 1: Describe Employment

1. Fill in your employment information.

If you have more than one job, attach a separate page with information about additional employers.

Include part-time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

**Employment status**

**Debtor 1**

- Employed  
 Not employed

**Debtor 2 or non-filing spouse**

- Employed  
 Not employed

**Occupation**

disabled

disabled

**Employer's name**

 

 

**Employer's address**

 

 

**How long employed there?**

#### Part 2: Give Details About Monthly Income

**Estimate monthly income as of the date you file this form.** If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

<b>For Debtor 1</b>	<b>For Debtor 2 or non-filing spouse</b>
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2. **List monthly gross wages, salary, and commissions** (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.
3. **Estimate and list monthly overtime pay.**
4. **Calculate gross Income.** Add line 2 + line 3.

2. \$ <u>0.00</u>	\$ <u>0.00</u>
3. +\$ <u>0.00</u>	+\$ <u>0.00</u>
4. <u> </u>	<u> </u>

Debtor 1 **Leslie Lyons**  
 Debtor 2 **Kathy Lyons**

Case number (if known)

**19-21165-JAD**

Copy line 4 here .....	<b>For Debtor 1</b>	<b>For Debtor 2 or non-filing spouse</b>
4.	\$ <b>0.00</b>	\$ <b>0.00</b>
<b>5. List all payroll deductions:</b>		
5a. <b>Tax, Medicare, and Social Security deductions</b>	5a. \$ <b>0.00</b>	\$ <b>0.00</b>
5b. <b>Mandatory contributions for retirement plans</b>	5b. \$ <b>0.00</b>	\$ <b>0.00</b>
5c. <b>Voluntary contributions for retirement plans</b>	5c. \$ <b>0.00</b>	\$ <b>0.00</b>
5d. <b>Required repayments of retirement fund loans</b>	5d. \$ <b>0.00</b>	\$ <b>0.00</b>
5e. <b>Insurance</b>	5e. \$ <b>0.00</b>	\$ <b>0.00</b>
5f. <b>Domestic support obligations</b>	5f. \$ <b>0.00</b>	\$ <b>0.00</b>
5g. <b>Union dues</b>	5g. \$ <b>0.00</b>	\$ <b>0.00</b>
5h. <b>Other deductions.</b> Specify: .....	5h.+ \$ <b>0.00</b>	+ \$ <b>0.00</b>
<b>6. Add the payroll deductions.</b> Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6. \$ <b>0.00</b>	\$ <b>0.00</b>
<b>7. Calculate total monthly take-home pay.</b> Subtract line 6 from line 4.	7. \$ <b>0.00</b>	\$ <b>0.00</b>
<b>8. List all other income regularly received:</b>		
8a. <b>Net income from rental property and from operating a business, profession, or farm</b> Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a. \$ <b>1,054.00</b>	\$ <b>0.00</b>
8b. <b>Interest and dividends</b>	8b. \$ <b>0.00</b>	\$ <b>0.00</b>
8c. <b>Family support payments that you, a non-filing spouse, or a dependent regularly receive</b> Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c. \$ <b>0.00</b>	\$ <b>0.00</b>
8d. <b>Unemployment compensation</b>	8d. \$ <b>0.00</b>	\$ <b>0.00</b>
8e. <b>Social Security</b>	8e. \$ <b>1,054.00</b>	\$ <b>899.00</b>
8f. <b>Other government assistance that you regularly receive</b> Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: <b>Daughter's Social Security Benefits</b>	8f. \$ <b>426.00</b>	\$ <b>0.00</b>
8g. <b>Pension or retirement income</b>	8g. \$ <b>0.00</b>	\$ <b>0.00</b>
8h. <b>Other monthly income.</b> Specify: .....	8h.+ \$ <b>0.00</b>	+ \$ <b>0.00</b>
<b>9. Add all other income.</b> Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9. \$ <b>2,534.00</b>	\$ <b>899.00</b>
<b>10. Calculate monthly income.</b> Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$ <b>2,534.00</b>	+ \$ <b>899.00</b> = \$ <b>3,433.00</b>
<b>11. State all other regular contributions to the expenses that you list in Schedule J.</b> Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: .....	11. +\$ <b>0.00</b>	
<b>12. Add the amount in the last column of line 10 to the amount in line 11.</b> The result is the combined monthly income. Write that amount on the <i>Summary of Schedules</i> and <i>Statistical Summary of Certain Liabilities and Related Data</i> , if it applies	12. \$ <b>3,433.00</b>	<b>Combined monthly income</b>
<b>13. Do you expect an increase or decrease within the year after you file this form?</b>	<input checked="" type="checkbox"/> No. <input type="checkbox"/> Yes. Explain: ..... 	